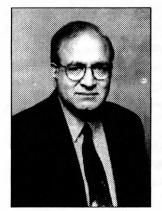


American Association of Cardiologists of Indian Origin

OCTOBER 2001 NEWSLETTER



Message From The President

Greetings to all fellow members, from sunny southern California. I hope to meet most of you in November 2001 at the fall C,M,E, sessions in Anaheim California. Our spring meeting was held in Orlando, Florida at the Peabody Hotel and was a great success. It was attended by a large number of young and not so young members. We had a successful C.M.E. programs arranged by Dr.

Rakesh Sharma and his C.M.E. group.

During the business meeting we had discussions about having a stand alone C.M.E. meeting of A.A.C.I.O. and are currently in the process of arranging funds for it. We are also trying to solicit funds on behalf of A.A.C.I.O. to fund scholarships. There is large competition for these funds and we need to continue these efforts. We have achieved some success and I would like all of you to join us in the process.

In California we are exploring the possibility of initiating a program for screening Indian Community for their special cardiac risk factors. Some of us have met with the President of a charitable foundation who has shown interest in pursuing this project.

We had a joint meeting of A.A.C.I.O. and American Association of Black Cardiologists in Toronto Canada on July 21, 2001. A number of issues of common interest were discussed. Several of our members including Dr. Navin Nanda and Dr. Indejit Anand were the featured speakers and enlightened us about the important issues.

Finally I am very honored to invite you to our fall C.M.E. program on November 11, 2001 in Anaheim, California. The program will be held at 7:30 PM at Hilton Anaheim which is across from the convention center. A dinner and C.M.E. program is planned. Please R.S.V.P. to Gail Brophy at 201-947-8406 (FAX). Our local reception committee stands ready to welcome you to California. The members of reception committee are:

- 1. Dr. N. Devraj 4. Dr. Harshad Shah
- 2. Dr. M. Khemka 5. Dr. Ramesh Japra
- 3. Dr. Anil Shah 6. Dr. Ruchir Sehra

I would like to thank members of my executive committee. Dr. Sukh Dev Sharma, Dr. Dayan Naik, Dr. R. Sanyal and Dr. Roychowohury for their help during the year. I would also like to give special thanks to Dr. Navin Nanda and Dr. Deshmukh and Dr. Deedwania for their guidance throughout the year.

Sincerely Satinder Swaroop, M.D., F.A.C.C.

6TH WORLD CONGRESS OF ECHOCARDIOGRAPHY AND VASCULAR ULTRASOUND

Ashok Hotel, New Delhi, India, February 8-10, 2002

The 6th World Congress of Echocardiography and Vascular Ultrasound will be held at the Ashok Hotel in New Delhi, India from February 8-10, 2002. This World Congress is sponsored by the International Society of Cardiovascular Ultrasound (ISCU) and organized by the Indian Academy of Echocardiography and Escorts Hearts Institute and Research Centre. The President of the Congress is Dr. Naresh Trehan. The International President is Dr. Navin C. Nanda, and the Secretary-General is Dr. (Col.) Satish K. Parashar. Several members of the AACIO, including Drs. Madhukar Deshmukh, Natesa Pandian, Bijoy Khanderia, Rakesh Sharma, Hanumanth Reddy and Navin C. Nanda will participate in the Congress. The deadline for abstract submission is October 31, 2001. Further infor-

mation is available at the following website: http://www.iscu.org and in the journal ECHOCARDIOGRAPHY A Journal of Cardiovascular UItrasound and Allied Techniques (ISCU official journal, published by Futura Publishing Company: http://www.futuraco.com/echo.htm).

The following is a schedule for future World Congresses of Echocardiography and Vascular Ultrasound: (7th) August 1-3, 2003, Hilton Hotel, Buenos Aires, Argentina; (8th) May 7-10, 2004, Antalya, Turkey; (9th) June 2005, Milan, Italy; (10th) May 18-20, 2006, Marrakesh, Morocco; (11th) 2007, Athens, Greece; (12th) 2008, Colombia.

All members of AACIO are invited to participate in the above World Congresses.

Mission And Goals of Indian Association of Cardiologists of Indian Origin

The idea of organizing cardiologists of Indian origin as an association originated about 14 years ago. Many of the Indian cardiologists used to get together informally during the annual scientific sessions of the AHA and ACC. At that time Drs. Roshan Lal and Navin Nanda were active in the affairs of the Association of Physicians of Indian Origin (AAPI) and proposed the formation of an association of Indian cardiologists under the umbrella of the parent organization (AAPI). This proposal was enthusiastically accepted by those who were present, prominent among them being (alphabetically), Madhukar Deshmukh, Raja Dhurandhar, Gopal Lalmalani, Atul Laddu, Dayan Naik, Navin Nanda, Pravin Shah, and many others.

The first meeting was held in Washington, DC approximately 14 years ago, with Navin Nanda as President, Pravin Shah as President-elect, Madhukar Deshmukh as Secretary, and Atul Laddu as Treasurer. Over the years the organization has taken root and gathered strength. A program was started to HONOR prominent cardiologists of Indian origin for their scientific and academic achievements, as well as those who contributed by their social work to their communities.

The first Young Investigator Award was presented in October 1994. The purpose of the Award was to encourage Junior members in clinical and basic sciences to compete and present their work. The first prize has since been increased to \$1000 and the second to \$750.

The Mission and Goals of the organization were outlined when the Association was formed:

- 1. Provide a central forum for physicians and scientists of Indian origin in the U.S.A. who have interest in cardiovascular diseases. This will promote close relationship amongst members for mutual benefit and advancement. We will work with organized medicine at local, state, and national levels and project the interest of our members.
- 2. Promote and maintain high standard of academic excellence and clinical practice of cardiology through educational, social, and scientific activities. This will be in the common interest of its members and the communities they serve.
- 3. Maintain close liaison with local, national, and international cardiovascular societies and organizations.
- 4. Establish a continuing relationship and communication with similar societies in India.
- 5. To recognize and honor outstanding cardiovascular professionals of Indian origin in various disciplines.
- 6. Address the special cardiovascular health problems of the Indian community in the US.

Strength is in numbers. Just as one candle lights another to increase its brightness, so too, if each current member brings another into the Association, our strength would be multiplied.

Editor's Page:

The Fall Meeting of AACIO will be held at the Hilton Anaheim, in Anaheim, CA at 7:30 p.m. on Nov. 11th, 2001 during the American Heart Association scientific session. The President, Satinder Swaroop, M.D. and the members of the reception committee have extended their cordial invitation. The dinner is free, and if you are attending the meeting, make it a point to come, and bring your family and friends.

The catastrophic event of September 11th in New York and Washington will haunt us for a long time. It is estimated that about 300 persons of Indian origin perished in the collapse of the World Trade Center. The medical community of New York and from many other states in the U.S. came to the rescue immediately, and working ceaselessly, demonstrated that "united we stand".

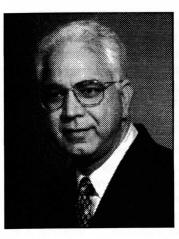
AACIO is forging an alliance with other medical groups. During the March 2001 Scientific Session of the American College of Cardiology a joint symposium on "Dysmetabolic Syndrome: Epidemic Cardiovascular Catastrophe" was held with the American Association of Black Cardiologists and the American Diabetic Association. Kanu Chaterjee, M.D. spoke on "Stable Angina, Pharmacotherapy: Implications for Prevention"

and Navin C. Nanda, M.D. spoke on "Coronary Artery Disease in Asian Indians: Myths and Facts". The 3rd Annual Joint Consultants Conference of AACIO-ABC was held in Toronto, Canada on July 20-22, 2001. There is a brief account of the meeting elsewhere in this newsletter.

It is a matter of great collective pride for us that the younger physicians of Indian origin are appearing prominently in the list of Young Investigators Award Competitions of American College of Cardiology and American Heart Association. During the ACC Scientific Session of March 2001 in Orlando, Florida Geetha Raghuveer, MBBS of Iowa City, Puvi N. Seshiah, MBBS of Atlanta and Ripudamanjit Singh, M.D. of Rochester, MN got "Honorable" mention among the fifteen finalists chosen for the award. Sanjay Rajagopalan, M.D, of Ann Arbor, Michigan was one among the five cardiovascular specialists who were recognized with Career Development Award during the same session of ACC. His project is "Mechanism of Impaired Endothelial Function in Depression". AACIO congratulates these awardees and wishes them the best.

Madhukar M. Deshmukh, M.D., F.R.C.P.

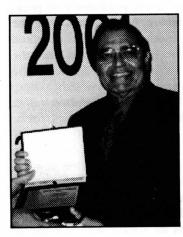
Members In The News



Jawahar L. Mehta, M.D., PhD, Professor of Internal Medicine, Physiology and Biophysics, and Division Director of Medicine, Cardiovascular University of Arkansas, Little Rock, was recently appointed to the Editorial Board of Circulation and Hypertension, major journals the American Heart Association. Dr. Mehta also serves on the Board of Directors of the Heartland AHA. He recently published his third book "Inflammatory and Infectious

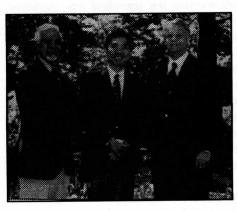
Basis of Atherosclerosis" which has been widely acclaimed.

Dr. Mehta is a life member of AACIO and the chairman of Awards Committee for many years.



Navin C. Nanda, M.D.Professor of Medicine and Director of Station/Echocardiography University Laboratory, Alabama at Birmingham is known internationally for his contributions to echocardiography. He was bestowed the honor Cordis "Princeps Echographie" Vasorumque ("Prince of Echocardiography of the Heart and Vessels") by the Society Italian Echocardiography during their

10th National Conference on June 20, 2001 in Milan, Italy. This award, which has never been given before, acknowledged Dr. Nanda's "highly qualified and recognized activities and outstanding promotion of cardiovascular echocardiography in the world".



Pravin M. Shah, M.D. is a Program Director of the Learning Center of the American College of Cardiology. He is seen in the picture with Aidan Raney, M.D. (right) and T a w e e s a k Chotivatanapong, M.D. (center). Dr. Chotivatanapong is a cardiothoracic surgeon

from Central Chest Hospital in Nonthaburi, Thailand. He is a visiting fellow sponsored for four months by the American College of Cardiology and World Heart Federation, and is taking advanced traIning in transesophageal echocardiography and mitral valve repair under Drs. Shah and Rainey in their respective fields. Dr. Shah is a past President of AACIO.

JOINT AACIO-ABC Scientific Meeting in Toronto, Canada

The 3rd Annual Consultant's Conference of the American Association of Cardiologists of Indian Origin (AACIO) and the Association of Black Cardiologists (ABC) was held at Le Royal Meridien King Edward Hotel in Toronto, Canada on July 20-22, 2001. The theme of the conference was "Hypertension to Heart Failure: Effective Treatment, Minimized Cardiovascular Risk, Improved Quality of Life". The conference was cochaired by Dr. Navin C. Nanda (Birmingham, Alabama) from AACIO and Dr. Keith Ferdinand (New Orleans, Louisiana) from ABC.

The participants from AACIO were Drs. Inderjit Anand, Venkataraman Balu, Ivan D'Cruz, Madhukar Deshmukh, Uma Guniganti, Kishore Harjai, Suresh Jain, Daniel Mascarenhas, Navin Nanda, Ashraf Nashed, Naresh Parikh, Hanumanth Reddy, Debasish Roychoudhury, Rakesh Sharma, and Satinder Swaroop. The participants from ABC were Drs. Olakumie Akinboboye, Oluyemi Badero, Aloysius Cuyjet, Janice Douglas, Carmellus Ezeugwu, Keith Ferdinand, John Flack, Leon Hendley, Mark Johnson, Donna Mendes, Judith Mitchell, Cranford Scott, Robert Scott, Malcolm Taylor, and Richard Allen Williams. Waine Kong, CEO of ABC was also in attendance.

Dr. Satinder Swaroop, President of AACIO, gave the special introductory address outlining some of the objectives and accomplishments of AACIO. Dr. Navin C. Nanda and Dr. Madhukar Deshmukh paid a tribute to the outstanding contributions to AACIO made by former AACIO President Dr. Krishna Ramaswamy of Boston. All AACIO-ABC participants observed a period of silence in memory of Dr. Ramaswamy who passed away a few weeks ago. Drs. Nanda and Ferdinand, in their remarks, underscored the growing cooperation between the two organizations, which will encourage many more joint endeavors in the future. Dr. Ferdinand lectured on managing cardiovascular disease in the African-American community. This was followed by a talk on the "Val-HeFT Study Results" by Dr. Inderjit S. Anand from Minneapolis, Minnesota, Dr. John M. Flack of Detroit, Michigan on "ARB Therapy in African-American Hypertensives", and Dr. Navin C. Nanda on "Newer Aspects of Assessing Left Ventricular Function Non-Invasively". There was an interesting discussion and feedback from the consultants on a curriculum for regional symposia addressing the problems of hypertension and heart failure.

The scientific sessions were followed by an evening dinner at a local restaurant and Disney's "The Lion King" at the Prince of Wales Theatre in downtown Toronto.

THE NATURAL HISTORY OF A CARDIOLOGY PAPER

Ivan A. D'Cruz, M.D., FRCP (Lond & Edin) Professor of Medicine, Medical College of Georgia

As with human life, every paper published in a cardiology (or other medical) journal has (1) a moment of conception, (2) a long laborious period of gestation, (3) a proud moment of public birth; (4) a life of varying usefulness and duration.

The idea for a scientific study illuminates the mind of its author in a flash of insight. A seed falls to intellectual earth unheralded, to bear fruit eventually months or even years later. It may have been triggered by an interesting case, by reading of an intriguing finding in some recent paper, by an animated argument with colleagues, by an apparently unimportant result in a routine conference presentation. What is common to these diverse situations is an agile intellect that can seize an odd fact and transform it into a valuable idea.

But ideas, however brilliant will not take root nor sprout into potential research projects unless they are nurtured in the proper intellectual substrate. Before an important new diagnostic sign, or a hitherto undescribed pathological appearance, appears in a leading cardiology journal, the same sign or abnormal finding was encountered many times, perhaps hundreds of times, by people who did not understand or recognize their significance. Most cardiologists who report electrocardiograms, echocardiograms, other imaging techniques or cathangio data in the course of their routine professional practice, are usually interested only in answering the question "what?" That is what the referring physician requests, that is what third party payers pay for, that alone brings in dollars. However, to those intellectually engaged in comprehending the disease under study, the most interesting answer is not "what?" but "how?" or "why?" and these may point the way to worthwhile research.

The magnitude of planning and work that go into a published study can vary tremendously. At one extreme, a brief report of a very unusual but clear-cut case could be put together in a week by one or two energetic authors. At the other extreme, several vast multicentered acronymous projects involving thousands of patients are now in progress, with

financial, organizational and statistical planning on a scale reminiscent of the more extravagant Federal programs. However, most papers fall somewhere in between, in scope or complexity.

The topic studied may be experimental or clinical. In the former, suitable animals in adequate numbers have to be purchased, fed and looked after for the duration of the experiment. For the clinical studies, a sufficient series of afflicted individuals have to be available and amenable to be processed into trials.

Interminable paperwork is inescapable. The dogs of bureaucracy do not cease from barking until their mouths are stuffed with sheafs of applicable forms in triplicate. Institutional research committees have to be appeased. Statistical pundits have to view the project, give it their blessings, and later lay their hands on their computers as the latter ingest, digest and then eject the raw data.

In every project, there is at lease one person who does most if not all of the tedious time-consuming work, who peruses tall stacks of patients records, who endures eyestrain and long hours making painstaking measurements. If and when the paper eventually achieves approbation and applause, this individual may reap only a small fraction of the glory. He can then console himself with the thought that he, by paying his professional dues, is making his arduous ascent toward a research career.

When at last all the results are in, the statistics analyzed, the previous literature comprehensively reviewed, the illustration labeled and photographed, then someone has to sit down and put pen to paper. Paragraph by paragraph, sentence by sentence, the paper is constructed in meticulous and orderly fashion. What to say, what to avoid saying, how to call attention to the authors' original findings or concepts without making extravagant claims, how to show that the authors' results are in accord with - though not merely a repetition of previous work, all constitute an art that is acquired after long practice and hard knocks from excessively critical reviewers. A month or two after mailing the paper to a cardiology journal (the extremes in my experience of over 100 papers were 3 weeks and 6 months) the authors are fortunate if invited to re-submit the paper after making revisions in accord with the reviewer's criticisms. With regard to their ferocity as critics, reviewers exhibit a wide variety, from courteous fair-minded gentlemen at one end of the spectrum to a nasty snarling misanthropes at the other. If the editor states his regrets that he cannot accept the paper, the authors have the alternatives of sending it to another journal, or of letting it die unborn.

The penultimate stage of the paper's gestation occurs in the publisher's or printer's establishment. It is customary for the latter to do nothing with the accepted paper for 4 to 8 months, then print the proofs which are sent in haste to the author by Express delivery with a stern admonition that they be corrected within 48 hours and returned or faxed forthwith.

Some 2 or 3 months later, one glorious morning, the issue bearing the precious paper arrives in the mail. As with human birth, the first exposure to the light of day provides its author with a sense of satisfaction and pride - emotions which have to be experienced to be truly understood. Well-deserved felicitations are in order. One's C.V. grows an inch longer. The local fellows and residents are favorably impressed, and may even concede that the attending who authored the paper may be made of better stuff than they had assumed.

However, the author who expects congratulations and compliments to flow in from all sides is often disappointed. The sad truth is that only a fraction of the faculty actually read the journals they receive; of these only a fraction read beyond the summaries. Of those few sufficiently interested to delve seriously into the paper, even fewer feel impelled to utter words of appreciation or encouragement, for reasons best known to themselves.

Continued on next page

3RD ANNUAL CME CRUISE "MEDICINE IN THE NEW MILLENNIUM: CRUISING INTO THE 21ST CENTURY"

Greek Isles, July 7-15, 2002

The American Association of Cardiologists of Indian Origin (AACIO) and The Association of Black Cardiologists (ABC) are sponsoring the 3rd Annual CME Conference/Cruise entitled "Medicine in the New Millennium: Cruising Into the 21st Century". The conference will be held at the Greek Isles on the Renaissance Cruise Ship from July 7-15, 2002.

Upon completion of this activity, participants will be able to identify and treat cardiac patients with hypertension, hyperlipidemia, coronary artery disease, peripheral vascular disease, congestive heart failure, and understand the optimal pathways to treat acute gastroesophageal reflux disease and review the management of community-acquired pneumonia and depression and understand the management of metastatic bone pains, anemia and arthritis in the elderly.

The Conference Directors are Rakesh K. Sharma, MD, FACC, of The Heart and Vascular Institute of Florida, Clearwater, Florida, and Navin C. Nanda, MD, FACC, Professor of Medicine and Director of the Heart Station at The University of Alabama at Birmingham, Birmingham, Alabama.

Topics covered will include echocardiography in ischemic heart disease, congenital heart disease and pericardial disease - update 2002, hemodynamics of echo Doppler (valvular & pericardial), management of hypertension - current updates, diagnosis of coronary artery disease with different radiopharmaceuticals, acute myocardial infarction 2002 - discovering optimal treatment pathways, current updates in management of anemia, innovative management of metastatic bone pain, post-interventional continuum of care - a focus of lipids, management of congestive heart failure, management of arthritis in the elderly, management of peripheral vascular disease supraclavicular interventions, update in management of peripheral vascular disease - infraclavicular interventions, gastroesophageal reflux disease (GERD): are we headed back to surgery?, management of community acquired pneumonia, and management of depression.

The Cruise itinerary is as follows: Day 1 - Athens, Greece; Day 2 - Athens, Greece; Day 3 - Santorini, Greece; Day 4 - At sea; Day 5 - Rhodes, Greece; Day 6 - Kusadasi, Turkey; Day 7 - Dardanelles and Mt. Athos; Day 8 - Istanbul, Turkey; Day 9 - Istanbul, Turkey.

The special Cruise rates are as follows: Inside Staterooms - \$990.00; Balcony Stateroom (D)-\$1299.00; Outside Ocean View-\$1249.00; and Balcony Stateroom (C)-\$1399.00. A refundable deposit of \$350.00 per person should be made as soon as possible, and the final payment is due by April 21, 2002. A limited number of cabins are available.

For information/reservations contact Krishna at Four Seasons Travel & Cruise Center, 6655 Central Avenue, St. Petersburg, Florida 33710 or call 727-345-1111 or 727-347-4000 or 800-771-4545. Reservations may also be made on the Four Seasons website at www.fourseasonstravel4u.com.

OBITUARY



It is with deep sorrow, AACIO announces the death of Dr. Ramaswamy on July 14th. 2001. Dr. Ramaswamy was active member of AACIO and was its past President, and vigorously participated in the affairs of the association. His was a frequent presence in the Continuous Medical Education pro-

grams in India and other countries, and his erudition will be sorely missed.

Dr. Ramaswamy graduated from Ahmedabad Medical College, Gujerat and did his post-graduate training in cardiology in Cincinnati, Ohio and Boston, Mass. He was on the staff of St. Elizabeth Hospital, Boston and practiced Interventional Cardiology since 1971.

He was considered a pillar of the Indian community in Boston, and took a leading roll in many of their projects. He was known to reach out generously to anyone in time of need. The Association offers condolences to his wife Ranjini, and sons Sridhar (physician in Boston) and Jaikumar (New York).

Cont. on next page

THE NATURAL HISTORY OF A CARDIOLOGY PAPER (CONT. FROM PREVIOUS PAGE)

How long does a paper live? Such attention as it does attract does not last more than a few weeks. Other authors, over the next few years, may quote it, providing the original authors with a fleeting gratification. Bound volumes of journals repose on the shelves of university libraries for decades, and perhaps a research scholar yet unborn will open the volume in 2025 or 2050 to bestow a curious glance on the paper, then only of passing historical interest.

The old or bound issue of the journal is thus not only the dwelling-place of the paper but also, its tomb. Therefore, in a sense, the paper starts aging and progresses toward death, the year it is born, as we do ourselves. But in another sense, it is immortal. The ideas or discoveries enshrined within those pages remain as young or meaningful as the day they were written, when senility or mortality has overtaken its authors.

If, long hence, the author's son or grandson feels motivated enough to take the musty volume off its dusty shelf and turn the yellowing pages, to achieve a closer acquaintance with his forbears work, that in itself might

American Association of Cardiologists of Indian Origin

cordially invites you to the

FALL DINNER MEETING

Sunday, November 11, 2001

at

Hilton Anaheim, Anaheim CA.

7:30 PM - Dinner and CME Program

RSVP - Gail Brophy - Fax: 201-947-8406

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Sukh Dev Sharma, MD Vice President

Dayanand Naik, MD Secretary

Rajat Sanyal, MD Treasurer

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